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Effective on 12/08/2004.				Complete if Known						
Fees pursuant to the Consolidated Appropriations Act, 2005 (H R 4818)				Application Number 10/66			6,579			
FEE TRANSMITTAL For FY 2005				Filing Date	ling Date Septembe			003		
				First Named In	ventor	Henry Kahle				
Applicant claims small entity status. See 37 CFR 1.27				Examiner Nam	1e	O'Connor, Cary E.				
				Art Unit 3732						
TOTAL AMOUNT OF PAYMENT (\$) 0.00				Attorney Docket No. A-2845-AL						
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order None Other (please identify):										
Deposit Account Deposit Account Number: 01-2215 Deposit Account Name Applied Medical Resources Corporation										
For the above-identified deposit account the Director is hereby authorized to: (check all that apply)										
Charge fee(s) Indicated below Charge fee(s) indicated below except for the filing fee										
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FEE CALCUL	uthorization on PTO-	2038.			-				,	
		ND EVALUATION								
BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES										
Application	Type Fee (Small Entity	Fee (\$	Small Entity		Small	Entity	Coss Br	alel (C)	
Utility	300	\$1 <u>Fee (\$)</u> 150	500	l <u>Fee (\$)</u> 250	<u>Fee</u> 200		(\$)	Fees Pa	กิด (จิโ	
Design	200	100	100	50	130		-			
Plant	200	100	300	150	160	·				
Reissue	300	150	500	250	600	Ü	_			
Provisional	200	100	0	0	000	50				
2. EXCESS CLAIM FEES Small Entity										
Fee (\$) Fee (\$)										
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100										
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent claims 360 180										
Total Claims 37 Extra Claims Fee (\$) Fee Paid (\$					Multip	le Depend	lent Claims		100	
10 -20 or HP = 0 x 50 = 0 HP = highest number of total claims paid for, if greater than 20					Fee	: (\$)	Fee Paid	<u>(\$)</u>		
Indep. Claims 4 Extra Claims Fee (\$) Fee Paid (\$)										
	or⊭P = <u>0</u> berofindependentcla	x 200	= <u>0</u>							
3. APPLICATI		man para tan di Stanton								
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)										
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Silee	- 100 =	/ 50 =	iber of each	(round up to a v			<u>Fee (\$)</u>	Fee	Paid (\$)	
4. OTHER FEE(S)								Face	e Daid (S)	
Non-English Specification, \$130 fee (no small entity discount)										
Other:										
SUBMITTED BY										
Signature	e Airid	Allani	6/. R	Registration No 5	3,257	T	Telephone 94	10 712 (0000	
lame (Print/Type)	David G. Majd	-1	<u>~7 </u>	Attorney/Agent) 5	0,207				77.00	
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This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.